



Linda McCulloch, Superintendent
Office of Public Instruction
Division of Special Education
PO Box 202501
Helena, MT 59620-2501
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**INDIVIDUALS WITH DISABILITIES
EDUCATION ACT
(IDEA)
2002 FINAL PROJECT EVALUATION REPORT**

Directions:

1. **REPORT IS DUE** no later than 40 days following the project ending date (refer to Final Report due date as stated on the Project Application Approval form).
2. Complete a separate report form for each federal project you have received approval for under Part B. Send to Marlene Wallis, Office of Public Instruction, Division of Special Education, PO Box 202501, Helena, MT 59620-2501, retain one copy in the project file.

Project Number	Name of Prime Applicant	County	Legal Entity No.
Name and Title of Person Completing this Report	Signature		Date Signed

I. IDENTIFY THE PROJECT GOALS:

Refer to the project application goals and list the objectives achieved for each.

II. IDENTIFY THE OUTCOMES ACHIEVED:

III. PERSONNEL INVOLVED IN THIS PROJECT:

List, or attach a list of personnel who were involved in this project. (e.g., 2 special education teachers, 3 aides, 1 school psychologist)

III. STUDENT POPULATION SERVED:
(e.g., students with disabilities, ages 3-5)

IV. EXPENDITURE REPORT:

Attach a copy of the final expenditure report that has been completed by the clerk/business manager.

V. PERSONNEL TRAINING FOR CURRENT SCHOOL YEAR:

If grant funds were used to support inservice activities, complete the information in the table below for each training activity.

Topic of Training	Number of Personnel and Position Trained	Completion Date of Training
Example: Special Education Rules	5 regular education teachers, 2 principals, 1 school psychologist	02/02/___

I certify that, to the best of my knowledge and belief, the information contained in this evaluation report is accurate and complete and a final expenditure report has been submitted.

Name and Title of Authorized Representative

Signature

Date Signed